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IN THE U.S. PATENT AND TRADEMARK OFFICE
Application Transmittal Sheet

Our Ref./Docket No.: BIGBOW-001

Box Patent Application
COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Dear Commissioner:

Transmitted herewith is the patent application of

INVENTOR(s)/APPLICANT(s)		
Last Name	First Name, MI	Residence (City and State or Country)
Jilk, Jr.	David J.	Superior, Colorado
Checkoway	Daniel A.	Newport Beach, California
Hoffman	Jonathan P.	Covina, California

Additional inventors are being named on separately numbered sheets attached hereto.

TITLE OF THE INVENTION

SYSTEM, METHOD, APPARATUS AND COMPUTER PROGRAM PRODUCT FOR OPERATING A
WEB SITE BY ELECTRONIC MAIL

CORRESPONDENCE ADDRESS AND AGENT FOR APPLICANT(S)

☒ Customer Number 21921

ENCLOSED APPLICATION PARTS (check all that apply)

Included are:

- ☒ 68 sheet(s) of specification, claims, and abstract
 - ☒ 22 sheet(s) of formal Drawing(s) with a submission letter to the Official Draftsperson
 - ☐ Information Disclosure Statement.
 - ☐ Form PTO-1449: INFORMATION DISCLOSURE CITATION IN AN APPLICATION, together with a copy of each references included in PTO-1449.
 - ☐ Declaration and Power of Attorney
 - ☐ An assignment of the invention to BigBow.com, Inc.
 - ☐ A letter requesting recordation of the assignment.
 - ☐ An assignment Cover Sheet.
 - ☒ Additional inventors are being named on separately numbered sheets attached hereto.
 - ☒ Return postcard.
- This application has:
- ☒ a small entity status. A verified statement:
 - ☐ is enclosed
 - ☐ was already filed.

The fee has been calculated as shown in the following page.

Certificate of Mailing under 37 CFR 1.10

I hereby certify that this application and all attachments are being deposited with the United States Postal Service as Express Mail (Express Mail Label: EL752476236US) in an envelope addressed to Box Patent Application, Commissioner for Patents, Washington, D.C. 20231 on.

Date: Feb 9, 2001 Signed: [Signature]

Name: Dov Rosenfeld, Reg. No. 38687

09780044-020001


	TOTAL CLAIMS	NO. OF EXTRA CLAIMS	RATE	EXTRA CLAIM FEE
TOTAL CLAIMS	81	61	\$9	\$ 549.00
INDEP. CLAIMS	7	4	\$40	\$ 160 00
BASIC APPLICATION FEE:				\$ 355.00
TOTAL FEES PAYABLE:				\$1,064.00

METHOD OF PAYMENT

- _____ A check in the amount of _____ is attached for application fee and presentation of claims.
_____ A check in the amount of \$ 40.00 is attached for recordation of the Assignment.
_____ The Commissioner is hereby authorized to charge payment of the any missing filing or other fees required for this filing or credit any overpayment to Deposit Account No. 50-0292
(A DUPLICATE OF THIS TRANSMITTAL IS ATTACHED):

Respectfully Submitted,

Feb 9, 2001
Date


Dov Rosenfeld , Reg. No. 38687

Correspondence Address:
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Application Cover Sheet (cont.)

INVENTOR(s)/APPLICANT(s)

Last Name	First Name, MI	Residence (City and Either State or Foreign Country)
Clark	Ralph A.	Oakland, California